### Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF GEORGIA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your	Ronald First name  W Middle name  McElhaney  Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
	meeting with the trustee.	Last name and Sumx (Sr., Jr., II, III)	Last name and Sumx (St., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3577	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs			
5. Where you live		526 E. 46th Street Savannah, GA 31405	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Chatham				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Debtor 1

Debtor 1 Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Case number (if known) Page:3 of 53

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7						
	choosing to file under							
		☐ Cha	apter 11					
		☐ Cha	apter 12					
		☐ Cha	apter 13					
8.	How you will pay the fee		about how you	may pay. Typically, if you are paying the fee torney is submitting your payment on your be	eck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money shalf, your attorney may pay with a credit card or check with			
					tion, sign and attach the Application for Individuals to Pay			
			request that	in Installments (Official Form 103A).  my fee be waived (You may request this opt	on only if you are filing for Chapter 7. By law, a judge may,			
		á	applies to you	family size and you are unable to pay the fee	your income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out ficial Form 103B) and file it with your petition.			
			. ,,,					
9.	Have you filed for bankruptcy within the last 8 years?	■ No.						
	•		District	When	Case number			
			District	When	Case number			
			District	When	Case number			
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes						
			Debtor		Relationship to you			
			District	When	Case number, if known			
			Debtor		Relationship to you			
			District	When	Case number, if known			
11.	Do you rent your	■ No.	Go to li	e 12.				
	residence?	☐ Yes	. Has you	landlord obtained an eviction judgment again	nst you and do you want to stay in your residence?			
			_	Io. Go to line 12.				
				10. G0 t0 lifte 12.				

Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Case number (if known) Page:4 of 53

Par	t 3: Report About Any Bu	sinesses	You Owi	n as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	oer, Street, City, Stat	e & ZIP Code
	it to this petition.		Chec	k the appropriate bo	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation in 11 U.S	s. If you in ns, cash-f s.C. 1116	ndicate that you are a low statement, and fo (1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	ram	not filing under Chap	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or Any	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
					Number, Street, City, State & Zip Code

Debtor 1

Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:5 of 53 Ronald W McElhaney

Debtor 1
Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Case number (if known) Page:6 of 53

Part	6: Answer These Quest	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.		<b>pusiness debts?</b> Business debts are debts estment or through the operation of the business debts.					
			☐ No. Go to line 16c. ☐ Yes. Go to line 17.						
		16c.	State the type of debts you	owe that are not consumer debts or busine	ess debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt pro vailable to distribute to unsecured creditors	perty is excluded and administrative expenses ?				
	administrative expenses		■ No						
	are paid that funds will be available for distribution to unsecured creditors?		Yes						
18.	How many Creditors do you estimate that you	<b>1</b> -49		□ 1,000-5,000 □ 5001-10,000	□ 25,001-50,000 □ 50,001-100,000				
	owe?	☐ 50-99 ☐ 100-1		☐ 10,001-10,000 ☐ 10,001-25,000	☐ More than 100,000				
		200-9		, ,	,				
19.	How much do you	□ \$0 - \$50,000		□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion				
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion				
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion				
Part	7: Sign Below								
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.							
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.							
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.							
		Ronald	ald W McElhaney W McElhaney e of Debtor 1	Signature of Debte	or 2				
		Executed	June 6, 2017 MM / DD / YYYY	Executed on Mi	M / DD / YYYY				

For your attorney, if you are represented by one

Debtor 1

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ JUDSON C. HILL	Date	June 6, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
JUDSON C. HILL Printed name		
GASTIN & HILL Firm name		
P. O. BOX 8012 SAVANNAH, GA 31412		
Number, Street, City, State & ZIP Code		
Contact phone (912) 232-0203	Email address	bankruptcy@gastinhill.com
#354277		
Bar number & State		

Case:17-40839-F.IC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:8 of 53 Fill in this information to identify your case: Debtor 1 Ronald W McElhaney Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA Case number (if known) ☐ Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 361.800.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 16.765.00 1c. Copy line 63, Total of all property on Schedule A/B..... 378,565.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 383.452.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 51,948.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 201,276.00 Your total liabilities 636.676.00 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 2,650.00 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 3,678.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:9 of 53

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_3,015.00

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	51,948.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	51,948.00

					1.00/00/	<b>4</b>	4-0046			
Fill			your case and th			17 Entered:06/06	/1 / 09:19	):4 <i>1</i> Pa	ige:	10 of 53
Deb	otor 1	Ronald W M	cElhanev							
		First Name		Name		Last Name				
	otor 2 use, if filing)	First Name	Middle	Name		Last Name				
Unit	ed States Ban	kruptcy Court for	the: SOUTHER	N DIST	RICT OF G	EORGIA				
Cas	e number					_				Check if this is an amended filing
_		m 106A/B <b>A/B: Pr</b>	_							12/15
hink nfori Answ	it fits best. Be mation. If more ver every questi	as complete and a space is needed, a ion.	accurate as possibl attach a separate sl	e. If two heet to t	married peo his form. On	If an asset fits in more than o ople are filing together, both a the top of any additional pag	re equally resp	onsible for su	ıpplyi	ng correct
Part	1: Describe E	ach Residence, Bi	uilding, Land, or Ot	her Real	I Estate You	Own or Have an Interest In				
I. Do	you own or ha	ave any legal or eq	uitable interest in a	ıny resid	dence, buildi	ng, land, or similar property?				
	No. Go to Part	2.								
	Yes. Where is	the property?								
1.1				What	t is the prop	erty? Check all that apply				
	526 E. 46th	Street		Single-family home Do not deduct				luct secured cla	aims c	or exemptions. Put
	Street address, if	available, or other des	cription		I Condomini	multi-unit building um or cooperative	the amoun	t of any secure	d clair	ms on Schedule D: cured by Property.
	Savannah	GA	31405-0000			red or mobile home	Current va			rrent value of the rtion you own?
	City	State	ZIP Code		Investment	t property	\$3	61,800.00		\$361,800.00
					Timeshare Other					wnership interest
				Who	_	rest in the property? Check one		e), if known.	ancy	by the entireties, or
	Chatham				Debtor 2 or	nly				
	County				Debtor 1 a	nd Debtor 2 only	- Chec	k if this is con	muni	ity property
					At least on	e of the debtors and another		structions)		, property
						n you wish to add about this i cation number:	tem, such as lo	ocal		

pages you have attached for Part 1. Write that number here.......>>

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

\$361,800.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

3. <b>C</b>	ars, vans, tru	cks, tractors, sport utility	vehicles, motorcycles		
	No				
	Yes				
3.1	Make: L	exus	Who has an interest in the property? Check one		d claims or exemptions. Put cured claims on <i>Schedule D:</i>
	Model: R	X350	■ Debtor 1 only		Claims Secured by Property.
	Year: 2	009	Debtor 2 only	Current value of the	Current value of the
	Approximate	mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other informa	ation:	☐ At least one of the debtors and another		
			Check if this is community property (see instructions)	\$11,265.0	\$11,265.00
				Do not doduct acquire	d claims or exemptions. But
3.2	mano.	BMC	Who has an interest in the property? Check one		d claims or exemptions. Put cured claims on Schedule D:
	Model: S	afari	■ Debtor 1 only		Claims Secured by Property.
	Year: 1	996	Debtor 2 only	Current value of the	Current value of the
	Approximate	mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other informa		At least one of the debtors and another		
			Check if this is community property (see instructions)	\$500.0	\$500.00
.p Part	ages you hav	ve attached for Part 2. Wri	own for all of your entries from Part 2, including any te that number hered Items Interest in any of the following items?		\$11,765.00  Current value of the portion you own? Do not deduct secured
		ods and furnishings or appliances, furniture, line			claims or exemptions.
		be	ens, china, kitchenware		claims or exemptions.
7. <b>E</b> I		stove, refrige	ens, china, kitchenware erator, 2 tvs, washer, dryer, queen bed, dresse pookcases, livingroom suit, patio set	r,	\$2,100.00
_	inclu No	stove, refrige computer, 2 l	erator, 2 tvs, washer, dryer, queen bed, dresse bookcases, livingroom suit, patio set		\$2,100.00
8. <b>C</b>	ixamples: Tele included included includ	stove, refrige computer, 2 levisions and radios; audio, auding cell phones, cameras be	erator, 2 tvs, washer, dryer, queen bed, dresse bookcases, livingroom suit, patio set  video, stereo, and digital equipment; computers, printers, media players, games	s, scanners; music colle	\$2,100.00 ections; electronic devices

Official Form 106A/B Schedule A/B: Property page 2

Debto	Case:17-40 Ronald W	839-EJC McElhaney	Doc#:1	Filed:06/06/17	Entered:06/06/17	' 09:19:47 umber (if known)	Page:12 of 53
Exa	musical in	otographic, ex		her hobby equipment; bi	cycles, pool tables, golf club	os, skis; canoes a	and kayaks; carpentry tools;
		golf clui	bs				\$150.0
E)		fles, shotguns	, ammunition,	and related equipment			
		2 rifles					\$250.0
	xamples: Everyday	clothes, furs,	leather coats,	designer wear, shoes, a	accessories		
		clothing	J				\$150.0
		≀ jewelry, costu	ıme jewelry, e	ngagement rings, weddi	ng rings, heirloom jewelry, v	vatches, gems, g	old, silver
		watch					\$150.0
Ex □ \ □ \ 14. <b>A</b> n	Yes. Describe	and househo	ld items you	did not already list, ind	cluding any health aids yo	u did not list	
				m Part 3, including an	/ entries for pages you ha	ve attached	\$2,800.00
Part 4:			iitable interes	st in any of the followi	na?		Current value of the
<i>D</i> 0 y0	a own or nave an	y logal of equ		or the following	·9 ·		portion you own?  Do not deduct secured claims or exemptions.
<b>I</b>	x <i>amples:</i> Money yo No		-	ur home, in a safe depos	it box, and on hand when yo	ou file your petitio	חכ
17. <b>De</b>	posits of money				denosit: shares in credit uni	ions brokerage b	nouses, and other similar

Institution name:

Schedule A/B: Property

institutions. If you have multiple accounts with the same institution, list each.

☐ No

■ Yes.....

Official Form 106A/B

page 3

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

■ No

☐ Yes. Give specific information about them...

Deb	otor Ca	ase:17-40839 Ronald W McE	- <mark>EJC</mark> Ihaney	Doc#:1	Filed:06/06/17	Entered:06/06/17 09:19:47 Case number (if known)	Page:14 of 53	
	☐ Yes.	Give specific inform	nation abo	ut them				
į	<i>Exam</i> µ ■ No	ses, franchises, and ples: Building permits  Give specific inform	s, exclusiv	e licenses, c		holdings, liquor licenses, professional license	es	
Mo	ney or	property owed to y	ou?				Current value of the	
	·						<ul><li>portion you own?</li><li>Do not deduct secured claims or exemptions.</li></ul>	
•	No	funds owed to you	ation abou	ıt them, inclu	iding whether you alread	dy filed the returns and the tax years		
ı	<ul> <li>Family support         Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement         ■ No         □ Yes. Give specific information     </li> </ul>							
ı	<ul> <li>Other amounts someone owes you         Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else     </li> <li>No</li> </ul>							
31. [	<ul> <li>☐ Yes. Give specific information</li> <li>Interests in insurance policies         <ul> <li>Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance</li> <li>☐ No</li> </ul> </li> </ul>							
	■ Yes.	Name the insurance		of each poli ny name:	cy and list its value.	Beneficiary:	Surrender or refund value:	
			whole Mutua		nce policy Mass	partner	\$439.00	
			term li Engine		ce with Chemical	partner	\$0.00	
			term li Genwo		ce policy with	partner	Unknown	
32.	<ul> <li>2. Any interest in property that is due you from someone who has died         If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.         No         Yes. Give specific information     </li> </ul>							
_	someo No		nation			arance points, or are carrothly challed to rece	., ., . ,	
33. -	No No Yes.  Claims Examp	Give specific informs	es, wheth		ou have filed a lawsuit urance claims, or rights t	or made a demand for payment		
33. ■	somed No No Yes.  Claims Examp	Give specific informs	es, wheth			or made a demand for payment		
33. • • • • • • • • • • • • • • • • • • •	No Yes.  Claims Examp No Yes.	Give specific inform  s against third parti  ples: Accidents, emp  Describe each clair	es, wheth	isputes, insu	ırance claims, or rights t	or made a demand for payment		

Official Form 106A/B Schedule A/B: Property page 5

Debt	Case:17-40839-EJC Doc#:1	Filed:06/06/17	Entered:06/06/17 09:19:47 Case number (if known)	Page:15 of 53
35. <b>A</b>	Any financial assets you did not already list			
	No			
	Yes. Give specific information			
36.	Add the dollar value of all of your entries fro for Part 4. Write that number here			\$2,200.00
Part	5: Describe Any Business-Related Property You C	Own or Have an Interest In.	List any real estate in Part 1.	
37. <b>D</b>	o you own or have any legal or equitable interest ir	n any business-related pro	perty?	
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-R If you own or have an interest in farmland, list it in		or Have an Interest In.	
46. <b>C</b>	o you own or have any legal or equitable int	erest in any farm- or co	mmercial fishing-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an	n Interest in That You Did N	lot List Above	
	Oo you have other property of any kind you d Examples: Season tickets, country club member			
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries fro	om Part 7. Write that nu	mber here	\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$361,800.00
56.	Part 2: Total vehicles, line 5		\$11,765.00	
57.	Part 3: Total personal and household items,	line 15	\$2,800.00	
58.	Part 4: Total financial assets, line 36		\$2,200.00	
59.	Part 5: Total business-related property, line	45	\$0.00	

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

Part 6: Total farm- and fishing-related property, line 52

Part 7: Total other property not listed, line 54

60.

61.

\$378,565.00

\$16,765.00

Official Form 106A/B Schedule A/B: Property page 6

\$0.00

\$0.00

\$16,765.00

Copy personal property total

Case:17-40839-F.IC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:16 of 53 Fill in this information to identify your case: Debtor 1 Ronald W McElhaney Middle Name First Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA Case number (if known) ☐ Check if this is an amended filing Official Form 106C Schedule C: The Property You Claim as Exempt 4/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 1996 GMC Safari O.C.G.A. § 44-13-100(a)(3) \$500.00 \$500.00 Line from Schedule A/B: 3.2 100% of fair market value, up to any applicable statutory limit stove, refrigerator, 2 tvs, washer, O.C.G.A. § 44-13-100(a)(4) \$2,100.00 \$2,100.00 dryer, queen bed, dresser, computer, -2 bookcases, livingroom suit, patio 100% of fair market value, up to any applicable statutory limit set Line from Schedule A/B: 6.1 golf clubs O.C.G.A. § 44-13-100(a)(6) \$150.00 \$150.00 Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit 2 rifles O.C.G.A. § 44-13-100(a)(6) \$250.00 \$250.00 Line from Schedule A/B: 10.1

Official Form 106C

clothing

Line from Schedule A/B: 11.1

\$150.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$150.00

O.C.G.A. § 44-13-100(a)(4)

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	watch Line from Schedule A/B: 12.1	\$150.00		\$150.00	O.C.G.A. § 44-13-100(a)(5)
	Line Holli Golleddie PVB. 12.1			100% of fair market value, up to any applicable statutory limit	
	Checking: South State Bank Line from Schedule A/B: 17.1	\$900.00		\$900.00	O.C.G.A. § 44-13-100(a)(6)
	Line Holli Schedule PAB. 11.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Wells Fargo Bank Line from Schedule A/B: 17.2	\$40.00		\$40.00	O.C.G.A. § 44-13-100(a)(6)
	Line Ironi Scriedule AVB. 17.2			100% of fair market value, up to any applicable statutory limit	
	Savings: Wells Fargo Bank Line from Schedule A/B: 17.3	\$21.00		\$21.00	O.C.G.A. § 44-13-100(a)(6)
	Ellie Holli Odilodale PVB. TTIO			100% of fair market value, up to any applicable statutory limit	
	Checking: Bank of America Line from Schedule A/B: 17.4	\$800.00		\$800.00	O.C.G.A. § 44-13-100(a)(6)
	Ellie Holli Golledale PVB. 17.4			100% of fair market value, up to any applicable statutory limit	
	whole life insurance policy Mass Mutual	\$439.00		\$439.00	O.C.G.A. § 44-13-100(a)(9)
	Beneficiary: partner Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustme	nt.)
	No				
	D. Van Distance and the same	and the other accordance Control			^

	Yes. Did	you acqu	uire the p	propert	y covered by	y the exem	ption within	1,215 da	ys before	you filed this case	1
--	----------	----------	------------	---------	--------------	------------	--------------	----------	-----------	---------------------	---

□ No

☐ Yes

Case:17-40839-EJC	Doc#:1 Filed:06/06/17	Entered:06/06/17 09:	19:47 Page:1	.8 of 53
Fill in this information to identify you	ur case:			
Debtor 1 Ronald W McEl	hanev			
First Name		t Name		
Debtor 2 (Spouse if, filling) First Name	Middle Name Las	it Name		
United States Bankruptcy Court for the	: SOUTHERN DISTRICT OF GEORG	SIA		
On a second of				
Case number (if known)			☐ Check	if this is an
			amend	ed filing
Official Form 106D				
Schedule D: Creditors	Who Have Claims Se	cured by Property	<del>/</del>	12/15
	If two married people are filing together, boout, number the entries, and attach it to thi			
Do any creditors have claims secured b	y your property?			
	this form to the court with your other sche	edules. You have nothing else to	report on this form.	
Yes. Fill in all of the information	•	dance. Tod have nothing clock	roport on the form.	
	below.			
Part 1: List All Secured Claims		Column A	Column B	Column C
	more than one secured claim, list the creditor s a particular claim, list the other creditors in P ical order according to the creditor's name.	separately	Value of collateral that supports this claim	Unsecured portion
2.1 Bank of America	Describe the property that secures the cl		\$11,265.00	\$0.00
Creditor's Name	2009 Lexus RX350			
D. O. Davis 454.44	As of the date you file, the claim is: Check	all that		
P. O. Box 45144 Jacksonville, FL 32231	apply.			
Number, Street, City, State & Zip Code	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortg	age or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechani	c's lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
Wells Forms Home				
Wells Fargo Home Mortgage	Describe the property that secures the cl	aim: \$322,187.00	\$361,800.00	\$0.00
Creditor's Name	526 E. 46th Street Savannah, GA		· · · · · · · · · · · · · · · · · · ·	
	31405 Chatham County			
P.O. Box 10335	As of the date you file, the claim is: Check	all that		
Des Moines, IA 50306	apply.  Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortg	age or secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechani	c's lien)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			

Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:19 of 53

Debtor 1 Ronald W McElhaney	Case number (if know)			
First Name Middle N	ame Last Name			
2.3 Wells Fargo Home	Describe the property that secures the claim:	\$50,000.00	\$361,800.00	\$10,387.00
Creditor's Name	526 E. 46th Street Savannah, GA 31405 Chatham County			
MAC X7801-03K 3476 Stateview Blvd. Fort Mill, SC 29715	As of the date you file, the claim is: Check all that apply.  Contingent	I		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in C	Column A on this page. Write that number here:	\$383,452.	00	
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.	\$383,452.	00	
Part 2: List Others to Be Notified for	or a Debt That You Already Listed			
trying to collect from you for a debt you o	be notified about your bankruptcy for a debt that yowe to someone else, list the creditor in Part 1, and tyou listed in Part 1, list the additional creditors have page.	d then list the collection agen	cy here. Similarly, if yo	ou have more
Name, Number, Street, City, State & Wells Fargo Home Mortgage P.O. Box 10335	je	which line in Part 1 did you enter	r the creditor? 2.3	
Des Moines, IA 50306	2400			

Case:17-40839-F.IC\_Doc#:1\_Filed:06/06/17\_Fntered:06/06/17\_09:19:47 Page:20 of 53 Fill in this information to identify your case: Debtor 1 Ronald W McElhaney First Name Middle Name Last Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name SOUTHERN DISTRICT OF GEORGIA United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim Priority** Nonpriority amount 2.1 **Georgia Department of Revenue** \$1,548.00 \$1,548.00 \$0.00 Last 4 digits of account number Priority Creditor's Name **Bankruptcy Section** When was the debt incurred? 1800 Century Blvd, NE, Suite 9100 Atlanta, GA 30345 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No ☐ Other. Specify ☐ Yes taxes

Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:21 of 53

2.2	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number\$5	0,400.00	\$50,400.00	\$0.00
	Centralized Insolvency	When was the debt incurred?			
	Operations				
	P.O. Box 7346				
	Philadelphia, PA 19101-7346  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that appl	V		
	Who incurred the debt? Check one.	☐ Contingent	•		
	Debtor 1 only	☐ Unliquidated			
	☐ Debtor 2 only	Disputed			
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government	nt		
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were into			
	■ No	☐ Other. Specify			
	Yes	taxes			
Pari	t 2: List All of Your NONPRIORITY Unsecu	red Claims			
3.	Do any creditors have nonpriority unsecured claim	s against you?			
	☐ No. You have nothing to report in this part. Submit	this form to the court with your other schedules.			
	0 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	■ Yes.				
1	unsecured claim, list the creditor separately for each c	alphabetical order of the creditor who holds each claim aim. For each claim listed, identify what type of claim it is. D creditors in Part 3.If you have more than three nonpriority u	Oo not list claims	already included in I	Part 1. If more
				Total c	laim
4.1	American Express	Last 4 digits of account number			\$30,000.00
	Nonpriority Creditor's Name	When we she debt in some 10	_		
	P.O. Box 981537 El Paso, TX 79998	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that a	pply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	<ul> <li>Obligations arising out of a separation agreement of report as priority claims</li> </ul>	or divorce that yo	ou did not	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other	similar debts		
	☐ Yes	Other. Specify CC			

Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:22 of 53

4.2	Bank of America	Last 4 digits of account number	\$12,811.00
	Nonpriority Creditor's Name P.O. Box 982238 El Paso, TX 79998-2238	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify cc-2 accounts	
4.3	Chase	Last 4 digits of account number	\$15,536.00
	Nonpriority Creditor's Name  Bankruptcy Unit P.O. Box 15298	When was the debt incurred?	
	Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify cc-2 accounts	
4.4	Coastal Empire Plastic Surgery  Nonpriority Creditor's Name	Last 4 digits of account number	\$24.00
	900 Mohawk Street Suite A	When was the debt incurred?	
	Savannah, GA 31419  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify med	

Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:23 of 53

4.5	Georgia Emergency Physician Specialists	Last 4 digits of account number	\$1,367.00
	Nonpriority Creditor's Name P. O. Box 3291 Indianapolis, IN 46206	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify med	
4.6	Home Depot Nonpriority Creditor's Name	Last 4 digits of account number	\$7,375.00
	P.O. Box 6497	When was the debt incurred?	
	Sioux Falls, SD 57117		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No	Other. Specify CC	
			<b>A</b> 40.40 <b>7</b> .00
4.7	Memorial Health University Med Ctr Nonpriority Creditor's Name	Last 4 digits of account number	\$16,135.00
	P. O. Box 23089	When was the debt incurred?	
	Savannah, GA 31403		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify med	

4.8	Memorial Physician Prac Group	Last 4 digits of account number	\$298.00
	Nonpriority Creditor's Name P.O. Box 102763	When was the debt incurred?	
	Atlanta, GA 30368-2763	When was the dept incurred:	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify med	
4.9	Minuteclinic of Virginia	Last 4 digits of account number	\$39.00
	Nonpriority Creditor's Name P. O. Box 8444	When was the debt incurred?	
	Belfast, ME 04915		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify <b>med</b>	
4.1	Overt Discussion		¢45.00
0	Quest Diagnostics  Nonpriority Creditor's Name	Last 4 digits of account number	\$15.00
	P.O. Box 740777 Cincinnati, OH 45274	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify med	

Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:25 of 53

4.1	Savannah Neurology Specialists  Nonpriority Creditor's Name P. O. Box 14359 Savannah, GA 31416  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated	\$39.00
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify med	
4.1	Small Business Administration  Nonpriority Creditor's Name	Last 4 digits of account number	\$100,000.00
	1720 Peachtree Road, NW 6th Floor, Peachtree 25th Complex Atlanta, GA 30309	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1 3	Southside Fire/EMS  Nonpriority Creditor's Name	Last 4 digits of account number	\$300.00
	Mercy Ambulance Service 1399 Dean Forest Road	When was the debt incurred?	
	Savannah, GA 31405  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify med	

Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:26 of 53

4.1	ST. Joseph's Hospital	Last 4 digits of account number	\$2,230.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	11705 Mercy Blvd. Savannah, GA 31419	when was the dept incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify med	
4.1	Wells Fargo	Last 4 digits of account number	\$6,501.00
5	Nonpriority Creditor's Name		Ψο,σοτισο
	P.O. Box 14517 Des Moines, IA 50306	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	Other. Specify CC	
4.1			
6	Wells Fargo	Last 4 digits of account number	\$8,606.00
	Nonpriority Creditor's Name P. O. Box 94435	When was the debt incurred?	
	Albuquerque, NM 87199  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify line of credit	

### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Case:17-40839-EJC Doc Debtor 1 Ronald W McElhaney	#:1 Filed:06/06/17	Entered:06/06/17 09:19:47 Page:27 of 53					
Internal Revenue Service Insolvency STOP 334-D, Room 400 401 W. Peachtree Street, NW Atlanta, GA 30308	Line 2.2 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims					
Atlanta, GA 30306	Last 4 digits of account number						
Name and Address Lanier Collection Agency & Services P.O. Box 15519 Savannah, GA 31416	On which entry in Part 1 or Part Line 4.4 of (Check one):	2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims					
Savaillali, GA 31410	Last 4 digits of account number						
Name and Address Memorial Health University Med Ctr Box 830913 Birmingham, AL 35283	On which entry in Part 1 or Part Line 4.7 of (Check one):  Last 4 digits of account number	2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims					
Name and Address Small Business Assistance Corp. P. O. Box 10750 Savannah, GA 31412	On which entry in Part 1 or Part Line 4.12 of (Check one):  Last 4 digits of account number	2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims					
Name and Address St. Joseph's/Candler Dept 2439 P.O. Box 2252 Birmingham, AL 35246-2439	On which entry in Part 1 or Part Line 4.14 of ( <i>Check one</i> ):  Last 4 digits of account number	2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims					
Name and Address Transworld Systems Inc 507 Prudential Road Horsham, PA 19044	On which entry in Part 1 or Part Line 4.9 of (Check one):  Last 4 digits of account number	2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims					
Name and Address US Attorney P. O. Box 8970 Savannah, GA 31412	On which entry in Part 1 or Part Line 4.12 of (Check one):  Last 4 digits of account number	2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims					

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 51,948.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 51,948.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				_
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 201,276.00

Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:28 of 53 Debtor 1 Ronald W McElhanev

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ **201,276.00** 

Case:17-//0839-F1C Filed:06/06/17 Entered:06/06/17 00:10:47 Page: 20 of 53 Doc#:1

	mation to identify your			711 00:13	1 age:20 01 00
Debtor 1	Ronald W McElha				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF GEORGIA		
Case number					
(if known)					☐ Check if this is an
					amended filing

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.4	•				
	Name				_
	Number	Street			<del>-</del>
	City		State	ZIP Code	<del></del>
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

Case:17-40839-F.IC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:30 of 53 Fill in this information to identify your case: Debtor 1 Ronald W McElhaney First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA Case number (if known) ☐ Check if this is an amended filing Official Form 106H **Schedule H: Your Codebtors** 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. □ No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Name, Number, Street, City, State and ZIP Code Check all schedules that apply: 3.1 Ronald McElhaney, Jr. ☐ Schedule D, line \_ ■ Schedule E/F, line 4.12

Official Form 106H Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com Schedule H: Your Codebtors

☐ Schedule G

**Small Business Administration** 

## Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:31 of 53

Fill	in this information to identify your ca	ase:								
De	btor 1 Ronald W M	cElhaney			_					
1 -	btor 2 puse, if filing)				_					
Un	ited States Bankruptcy Court for the	: SOUTHERN DISTRIC	CT OF GEORGIA		_					
	se number		_			Chec	k if this is	:		
(If k	nown)						n amend	J		
									g postpetition ollowing date:	chapter
0	fficial Form 106I					N	IM / DD/ `	/YYY		
S	chedule I: Your Inc	ome								12/15
spo	plying correct information. If you use. If you are separated and you ach a separate sheet to this form.  The describe Employment	ır spouse is not filing w	ith you, do not inclu	ıde infori	natio	on about	your sp	ouse. If me	ore space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor	2 or non-fi	iling spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Empl	•		
	information about additional employers.		☐ Not employed				□ Not e	mployed		
	employers.	Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?							
Pa	rt 2: Give Details About Mor	nthly Income								
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any I	ine, write	\$0 in the	space. Ind	clude your nor	n-filing
	ou or your non-filing spouse have more space, attach a separate sheet to		ombine the informatio	n for all e	emplo	oyers for	that perso	on on the li	nes below. If y	ou need
						For Dek	otor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

## Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:32 of 53

Deb	tor 1	Ronald W McElhaney	_	C	Case number (if kr	nown	, <u> </u>			
	Cor	by line 4 here	4.		For Debtor 1	0.00		For Debtor		
	-		4.		Ψ	<i>.</i>	_ '	Ψ	IN/ P	<u>`</u>
5.		all payroll deductions:	_		_			_		
	5a.	Tax, Medicare, and Social Security deductions	5a.			0.00	_	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.			0.00	_	\$	N/A	_
	5c.	Voluntary contributions for retirement plans	5c.			0.00	_	\$	N/A	
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.		·	).00 ).00	_	\$ \$	N/A N/A	_
	5f.	Domestic support obligations	5f.		:	).00 ).00		\$ 	N/A	_
	5g.	Union dues	5g.		·	).00 ).00	_	\$	N/A	_
	5h.	Other deductions. Specify:	5h.		·		_	\$	N/A	_
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.			0.00		\$	N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.			0.00	_	\$	N/A	_
8.	8b. 8c.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive	8a. 8b.			).00 ).00	_	\$ 	N/A N/A	_
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$ (	0.00		\$	N/A	
	8d.	Unemployment compensation	8d.		·	).00 ).00	_	\$ 	N/A	_
	8e.	Social Security	8e.		\$ 1,800		_	\$	N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income	8f. 8g.		\$	0.00	<u> </u>	\$ \$	N/A N/A	<u> </u>
	8h.	Other monthly income. Specify: Partner Social Security	_ 8h.	.+	\$ 850	).00	<u> </u>	<b></b>	N/A	<u></u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,650	0.00		\$	N/	Α
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,650.00	+	\$	N/A	= \$	2,650.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		_	1471	<u> </u>	_,000.00
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe					in Schedul	e J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							\$	2,650.00
									Combi	ned ly income
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?							
	$\overline{\Box}$	Yes. Explain:								

Official Form 106I Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	onic case.					
	tor 1	Ronald W Mo		,		Che	eck if this is:	
							An amended filing	
	tor 2							wing postpetition chapter
(Spc	ouse, if filing)						13 expenses as of	f the following date:
Unite	ed States Bankr	uptcy Court for the	: SOUTH	IERN DISTRICT OF GEO	RGIA		MM / DD / YYYY	
l	e number nown)							
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	ISAS				12/15
Be a info nun	as complete a ormation. If m nber (if know	and accurate as ore space is ne n). Answer ever	possible eded, atta ry questio	. If two married people ar ch another sheet to this				
Part 1.	Is this a join	ibe Your House	hold					
٠.	No. Go to							
	☐ Yes. <b>Doe</b>	s Debtor 2 live i	in a separ	ate household?				
	□ No	0						
	□ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	hold of De	ebtor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
								☐ Yes
								□ No
								Yes
								□ No
3.	Do your ove	enses include	_					Yes
	expenses of yourself and	f people other to d your depende	han nts? □	No Yes				
exp	imate your ex		our bankrı	uptcy filing date unless y				apter 13 case to report of the form and fill in the
the		n assistance an		government assistance i cluded it on <i>Schedule I:</i> Y			Your exp	penses
4.		or home owners		ses for your residence. I	nclude first mortgage	e 4.	\$	1,690.00
	If not includ	•	G = : G					
		estate taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.		0.00
	•	•		ıpkeep expenses		4c.	·	65.00
		owner's associat				4d.		0.00
5.	Additional n	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$	230.00

## Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:34 of 53

Debtor	1 Ronald	W McElhaney	Case num	ber (if known)	
6 114	tilitios				
6. <b>Ut</b>	tilities:	, heat, natural gas	6a.	\$	250.00
6b	•	wer, garbage collection	6b.	· ·	
		wer, garbage collection e, cell phone, Internet, satellite, and cable services	6c.	·	80.00
60	•			·	120.00
6d		·	6d.	·	0.00
		ekeeping supplies	7.	·	400.00
		children's education costs	8.	·	0.00
	-	lry, and dry cleaning	9.		65.00
		products and services	10.	·	15.00
		ntal expenses	11.	\$	120.00
	r <b>ansportation</b> o not include c	. Include gas, maintenance, bus or train fare.	12.	\$	250.00
		clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
		tributions and religious donations	14.	·	0.00
	surance.		17.	*	0.00
-		nsurance deducted from your pay or included in lines 4 or 20.			
	5a. Life insura		15a.	\$	0.00
	5b. Health ins		15b.	·	0.00
	5c. Vehicle in		15c.	· -	150.00
		urance. Specify:	15d.	·	0.00
		nclude taxes deducted from your pay or included in lines 4 or 20.		*	0.00
	pecify:	iolado taxoo doddotod from your pay or moladod fir fillos 4 or 20.	16.	\$	0.00
		ease payments:		•	
		ents for Vehicle 1	17a.	· -	243.00
		ents for Vehicle 2	17b.	·	0.00
	7c. Other. Sp		17c.	· -	0.00
	d. Other. Sp	·	17d.	\$	0.00
		of alimony, maintenance, and support that you did not report as		\$	0.00
		your pay on line 5, Schedule I, Your Income (Official Form 106I). s you make to support others who do not live with you.	10.	\$	0.00
	pecify:	s you make to support others who do not live with you.	19.	Ψ	0.00
	· -	erty expenses not included in lines 4 or 5 of this form or on Scho		our Income	
		s on other property	20a.		0.00
	Ob. Real estat	• • •	20b.		0.00
		homeowner's, or renter's insurance	20c.	· -	0.00
		nce, repair, and upkeep expenses	20d.	·	0.00
		ner's association or condominium dues	20a. 20e.	·	
		ici ə association of condominium ques			0.00
. i. U	ther: Specify:		21.	+\$	0.00
	-	monthly expenses			
	2a. Add lines 4	· ·		\$	3,678.00
22	2b. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22	2c. Add line 22	a and 22b. The result is your monthly expenses.		\$	3,678.00
23. C±	alculate vour	monthly net income.			
	-	12 (your combined monthly income) from Schedule I.	23a.	\$	2,650.00
		r monthly expenses from line 22c above.	23b.	*	3,678.00
20	oo. Copy you	THORAIN, EXPONED HORITIMO 220 above.	200.	<b>*</b>	3,070.00
23		our monthly expenses from your monthly income.	22	œ.	-1 029 00
	The result	t is your monthly net income.	23c.	\$	-1,028.00
24. <b>D</b> a	o vou expect	an increase or decrease in your expenses within the year after your	ou file this	s form?	
Fo	or example, do y	ou expect to finish paying for your car loan within the year or do you expect you			or decrease because of a
		terms of your mortgage?			
	No.				
	] Yes.	Explain here:			

Fill in this info	ormation to identify you	case:			
Debtor 1	Ronald W McElh	anev			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	SOUTHERN DISTRICT	OF GEORGIA		
Case number (if known)					☐ Check if this is an amended filing
	rm 106Dec ation About a	an Individual	Debtor's Sc	hedules	12/15
obtaining mon years, or both.		n connection with a bank			ent, concealing property, or or imprisonment for up to 20
Did you p	pay or agree to pay som	eone who is NOT an attori	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				ptcy Petition Preparer's Notice, nd Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sumi	mary and schedules filed	l with this declaration	and
X /s/ R	onald W McElhaney		Х		
Rona	ald W McElhaney ture of Debtor 1		Signature of D	Debtor 2	
Date	June 6, 2017		Date		

Fill i	n this inforr	nation to identify you	r case:			
Debt						
Debt	.01 1	Ronald W McElh First Name	Middle Name	Last Name		
Debt (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name		
		nkruptcy Court for the:	SOUTHERN DISTRICT (	OF GEORGIA		
Coor						
(if kno	e number wn)					heck if this is an mended filing
O.(.	: -: - 1 🗖 -	407				
	icial Fo tement		Affairs for Individ	duals Filing for B	ankruptcy	4/16
inforr numb	mation. If moer (if know	nore space is needed, n). Answer every que	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup	
<b>Part</b> 1. \		r current marital statu	rital Status and Where You	Lived Before		
	☐ Married ■ Not mai					
2. I			lived anywhere other than	where you live now?		
1	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
		ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad		Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
ı	No					
I	☐ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	ficial Form 106H).		
Part	2 Explai	in the Sources of You	r Income			
F	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part		ndar years?
ı	□ No					
١	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$8,000.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debtor 1 Ro	e:17-40839-EJC onald W McElhaney	Doc#:1 Filed:06/C	06/17 Entered:06/0 	06/1 / 09:19:4 / Page number (if known)	ge:37 of 53
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calen (January 1 to	dar year: December 31, 2016 )	■ Wages, commissions, bonuses, tips	\$60,000.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	dar year before that: December 31, 2015)	■ Wages, commissions, bonuses, tips	\$61,958.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
□ No	source and the gross inco	ome from each source separa	tely. Do not include income th	nat you listed in line 4.	
		Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
	y 1 of current year until filed for bankruptcy:	Social Security	\$10,800.00		
For last calen (January 1 to	dar year: December 31, 2016 )	Social Security	\$22,600.00		
	dar year before that: December 31, 2015 )	Social Security	\$22,600.00		
Part 3: List	Certain Payments You	Made Before You Filed for	Bankruntev		
	r Debtor 1's or Debtor 2 Neither Debtor 1 nor D	's debts primarily consume	r debts? umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	1(8) as "incurred by an
	During the 90 days before No. Go to line 7	ore you filed for bankruptcy, di	d you pay any creditor a tota	of \$6,425* or more?	
	☐ Yes List below e paid that cre	each creditor to whom you pai	nts for domestic support oblig	n one or more payments and the ations, such as child support a	
_	* Subject to adjustment	t on 4/01/19 and every 3 year	s after that for cases filed on	or after the date of adjustment	
■ Yes.		or both have primarily consure you filed for bankruptcy, di		of \$600 or more?	
	■ No. Go to line 7	,			

**Creditor's Name and Address Dates of payment** Amount you Was this payment for ... **Total amount** paid still owe

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Official Form 107

attorney for this bankruptcy case.

7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their voting	rships of which securities; and	you are a genera any managing a	al partner; corporations agent, including one for
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	ny property on	account of a d	ebt that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment litor's name
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of th	ne case
10.	Case number  Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No. Go to line 11.		erty repossessed, fo	oreclosed, garr	nished, attached	d, seized, or levied?
	☐ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property  Explain what happened	ı	Dat	e	Value of the property
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed  No  Yes. Fill in the details.	otcy, did any creditor, incl		ancial instituti	on, set off any a	amounts from your
	Creditor Name and Address	Dat tak	e action was en	Amount		
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes		erty in the possessi	on of an assigi	nee for the ben	efit of creditors, a
Pai	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift.	otcy, did you give any gifts	s with a total value	of more than \$	600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts			es you gave gifts	Value
	Person to Whom You Gave the Gift and Address:					

14.	Within 2 years before you filed for bankr  ■ No  □ Yes. Fill in the details for each gift or c		, .	s with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did yo	ou lose anytl	ning because of thef	t, fire, other disaster
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loather the amount that insurance has paid. Lice claims on line 33 of Schedule A/B: F	st pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	<b>s</b>				
	Within 1 year before you filed for bankru consulted about seeking bankruptcy or plinclude any attorneys, bankruptcy petition p	oreparin	ng a bankruptcy petition?			rty to anyone you
	□ No ■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou .	Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment
	Abacus Credit Counseling 15760 Ventura Boulevard Suite 1240 Encino, CA 91436		\$25.00		June 5, 2017	\$25.00
	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that  No Yes. Fill in the details.	litors o	to make payments to your creditors		r transfer any prope	rty to anyone who
	Person Who Was Paid Address		Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment
<ul> <li>Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, transferred in the ordinary course of your business or financial affairs?</li> <li>Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on include gifts and transfers that you have already listed on this statement.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>				erty to anyone, othe		
	Person's relationship to you		Description and value of property transferred		any property or received or debts change	Date transfer was made

19.	9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)				
	■ No □ Yes. Fill in the details.				
	Name of trust	Description and v	value of the property trai	nsferred	Date Transfer was made
				•.	maao
Par	t 8: List of Certain Financial Accounts, Ir	nstruments, Safe Deposit	t Boxes, and Storage Un	its	
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial accoun	nts; certificates of depos		
	■ No □ Yes. Fill in the details.				
4	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, any safe d	eposit box or other depo	sitory for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		e the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than your	home within 1 year bef	ore you filed for bankrup	tcy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		e the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Contro	ol for Someone Else			
23.	Do you hold or control any property that so for someone.	omeone else owns? Incl	ude any property you bo	orrowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		e the property	Value
Par	t 10: Give Details About Environmental In	formation			
For	the purpose of Part 10, the following definit	tions apply:			
-	Environmental law means any federal, stat toxic substances, wastes, or material into regulations controlling the cleanup of thes	the air, land, soil, surface	e water, groundwater, o		

regulations controlling the cleanup of these substances, wastes, or material.

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used

to own, operate, or utilize it, including disposal sites.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24.	1. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	■ No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of a	nny release of hazardous material?							
	No Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or admi	inistrative proceeding under any enviro	onmental law? Include settlements	and orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	11: Give Details About Your Business or C	,							
27.	Within 4 years before you filed for bankruptc	y, did you own a business or have any	of the following connections to any	/ business?					
	☐ A sole proprietor or self-employed in	•	-	,					
	☐ A member of a limited liability compa	•	•						
	<u> </u>	iny (LLO) or infinited hability partitership	(LLI)						
	☐ A partner in a partnership								
	☐ An officer, director, or managing exe	cutive of a corporation							
	☐ An owner of at least 5% of the voting	or equity securities of a corporation							
	■ No. None of the above applies. Go to Pa	art 12.							
	☐ Yes. Check all that apply above and fill i	n the details below for each business.							
	Business Name	Describe the nature of the business	Employer Identification numbe Do not include Social Security						
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	number or ITIN.					
28.	Within 2 years before you filed for bankruptc institutions, creditors, or other parties.	y, did you give a financial statement to	anyone about your business? Inclu	ude all financial					
	■ No								
	Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued							

Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:42 of 53

Part 12: Sign Below	
are true and correct. I unde	this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers erstand that making a false statement, concealing property, or obtaining money or property by fraud in connection result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  9, and 3571.
/s/ Ronald W McElhane	у
Ronald W McElhaney	Signature of Debtor 2
Signature of Debtor 1	
Date June 6, 2017	Date
Did you attach additional p	ages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No	
□ Yes	
Did you pay or agree to pa	y someone who is not an attorney to help you fill out bankruptcy forms?
No	
☐ Yes Name of Person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Fill in this inform	nation to identify your	case:		
Debtor 1	Ronald W McElha			
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	—
United States Bar	nkruptcy Court for the:	SOUTHERN DIS	TRICT OF GEORGIA	
	, ,			_
Case number (if known)				☐ Check if this is an
				amended filing
If you are an indi	nt of Intentio	pter 7, you must fi	viduals Filing Under Cha	apter 7 12/15
	e claims secured by yo			
You must file this	ver is earlier, unless th	rithin 30 days after	not expired.  Tyou file your bankruptcy petition or by the content of the content	
	eople are filing together	<sup>·</sup> in a joint case, bo	oth are equally responsible for supplying co	rect information. Both debtors must
Be as complete a	and accurate as possib	le. If more space i	s needed, attach a separate sheet to this for	m. On the top of any additional pages.
	our name and case nur			, and a part of page 1, and a
Part 1: List Yo	our Creditors Who Have	e Secured Claims		
1 For any credite	ore that you listed in Pa	art 1 of Schedule [	D: Creditors Who Have Claims Secured by Pr	roperty (Official Form 106D) fill in the
information be	elow.		•	
Identify the cre	editor and the property t	nat is collateral	What do you intend to do with the proper secures a debt?	ty that Did you claim the property as exempt on Schedule C?
Creditor's B	ank of America		☐ Surrender the property.	□No
name:	ank of America		Retain the property and redeem it.	□ NO
December of	0000 L DV050		Retain the property and enter into a	■ Yes
·	2009 Lexus RX350		Reaffirmation Agreement.	
property securing debt:			☐ Retain the property and [explain]:	
· ·				
One difference 18	/ II - E 11 14	•		
Creditor's <b>W</b> name:	lells Fargo Home Mo	rtgage	<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	□ No
namo.			Retain the property and redeem it.  Retain the property and enter into a	■ Yes
Description of			Reaffirmation Agreement.	
property	GA 31405 Chathai	n County	☐ Retain the property and [explain]:	
securing debt:				
Creditor's W	lells Fargo Home Mo	rtgage	☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	_
Description of	526 E. 46th Street	Savannah	Retain the property and enter into a	■ Yes
property	GA 31405 Chathai		Reaffirmation Agreement.	

Official Form 108

property

Statement of Intention for Individuals Filing Under Chapter 7

☐ Retain the property and [explain]:

### Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:44 of 53

Debtor 1 Ronald W McElha	ney	Case number (if known)	
securing debt:			_
	Personal Property Leases		
in the information below. Do no	ot list real estate leases. Unexpired I	lule G: Executory Contracts and Unexpire eases are leases that are still in effect; the ee does not assume it. 11 U.S.C. § 365(p)(2)	e lease period has not yet ended.
Describe your unexpired person	onal property leases		Will the lease be assumed?
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Lessor's name: Description of leased			□ No
Property:			☐ Yes
Lessor's name: Description of leased			□ No
Property:			☐ Yes
Part 3: Sign Below			
Under penalty of perjury, I decla property that is subject to an u	are that I have indicated my intentio nexpired lease.	n about any property of my estate that se	cures a debt and any personal
X /s/ Ronald W McElhane	-	X	
Ronald W McElhaney Signature of Debtor 1		Signature of Debtor 2	
Date <b>June 6, 2017</b>		Date	

Fill in this info	ormation to identify your case:				directed in this form and	d in Form
Debtor 1	Ronald W McElhaney		122	2A-1Supp:		
Debtor 2 (Spouse, if filing)				■ 1. There is no pres	sumption of abuse	
United States	s Bankruptcy Court for the: Southern District o	f Georgia	'	applies will be	to determine if a presumade under <i>Chapter 7</i>	•
Case numbe (if known)	r			☐ 3. The Means Tes	ficial Form 122A-2). t does not apply now be	
				•	y service but it could a	oply later.
Official	Form 122A - 1			☐ Check if this is a	an amended filing	
			a (la la a las a			
Chapte	r 7 Statement of Your Cur	rent Mor	ntniy inc	ome		12/15
attach a separa case number (i qualifying milit	e and accurate as possible. If two married people a ate sheet to this form. Include the line number to w if known). If you believe that you are exempted fron eary service, complete and file Statement of Exemp Calculate Your Current Monthly Income	hich the additior n a presumption	nal information a of abuse becau	applies. On the top of a se you do not have pri	nny additional pages, wri marily consumer debts o	te your name and or because of
1. What is	your marital and filing status? Check one on	ly.				
■ Not	married. Fill out Column A, lines 2-11.					
☐ Marr	ied and your spouse is filing with you. Fill ou	t both Columns	A and B, lines	2-11.		
_	ied and your spouse is NOT filing with you.					
☐ Li	ving in the same household and are not lega	lly separated.	- Fill out both Co	lumns A and B, lines	2-11.	
p	ving separately or are legally separated. Fill of enalty of perjury that you and your spouse are leading apart for reasons that do not include evading	egally separated	d under nonban	kruptcy law that appl	ies or that you and you	
101(10A). F the 6 month	verage monthly income that you received from all so for example, if you are filing on September 15, the 6-months, and divide the total on the same rental property, put the income from that property.	onth period would by 6. Fill in the res	be March 1 throusult. Do not include	ugh August 31. If the am de any income amount n	ount of your monthly incor nore than once. For examp	ne varied during ble, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, a deductions).	and commission	ons (before all	\$	\$	
	<b>y and maintenance payments.</b> Do not include B is filled in.	payments from	a spouse if	\$	\$	
of you of from an and room	bunts from any source which are regularly pa or your dependents, including child support. unmarried partner, members of your household mmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular, your depender	contributions nts, parents,	\$0.00	\$	
5. Net ince	ome from operating a business, profession, o					
			otor 1			
	eceipts (before all deductions)	\$ 0.00 -\$ 0.00				
•	y and necessary operating expenses	0.00	Copy here ->	\$ 0.00	\$	
	nthly income from a business, profession, or farr ome from rental and other real property	11.4	оору пого и	ф <u></u>	<u> </u>	
U. 1461 IIIU	one nomination and other real property	Deb	otor 1			
Gross re	eceipts (before all deductions)	\$ 0.00				
	y and necessary operating expenses	-\$ 0.00				
•	nthly income from rental or other real property	\$ 0.00	Copy here ->	\$0.00	\$	
7. Interest	, dividends, and royalties			\$ 0.00	\$	

Official Form 122A-1

Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:46 of 53

Debtor 1 Ronald W McElhaney Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing sp	pouse
8.	Unemployment compensation			\$	0.00	\$	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	nt received was a benef	fit under				
	For you	\$	00				
	For your spouse	\$					
	Pension or retirement income. Do not include any a benefit under the Social Security Act.			\$	0.00	\$	
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against he domestic terrorism. If necessary, list other sources on total below.	Security Act or paymen umanity, or international	nts or				
	Partner Soc. Sec.			\$	850.00	\$	
				\$	0.00	\$	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	
11.	Calculate your total current monthly income. Add I each column. Then add the total for Column A to the t		\$	3,015.00	+ \$		= \$ 3,015.00
					J [		Total current monthly
Part	Determine Whether the Means Test Applies	to You					income
12.	12. Calculate your current monthly income for the year. Follow these steps:						
	12a. Copy your total current monthly income from line	11		Сору	y line 11 h	ere=>	\$3,015.00_
	Multiply by 12 (the number of months in a year)						<b>x</b> 12
	12b. The result is your annual income for this part of the	he form				12b.	\$36,180.00
13.	Calculate the median family income that applies to	you. Follow these step	os:				
	Fill in the state in which you live.	GA					
	Fill in the number of people in your household.	2					
	Fill in the median family income for your state and size	e of household.				13.	\$ 56,301.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the ban	o online using the link sp kruptcy clerk's office.	pecified	in the separa	ate instruct	ions	
14.	How do the lines compare?						
	<ul><li>Line 12b is less than or equal to line 13. 0</li><li>Go to Part 3.</li></ul>	On the top of page 1, ch	eck box	(1, There is r	no presum	ption of abuse	
	14b.   Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	, The pr	esumption of	abuse is o	determined by	Form 122A-2.
Part	3: Sign Below						
	By signing here, I declare under penalty of perjur	ry that the information or	n this st	atement and	in any atta	chments is tru	e and correct.
	X /s/ Ronald W McElhaney						
	Ronald W McElhaney Signature of Debtor 1						
	Date <b>June 6, 2017</b>						
	MM / DD / YYYY  If you checked line 14a, do NOT fill out or file For	rm 122A-2.					
	If you checked line 14b, fill out Form 122A-2 and						
	you oncome into 170, iii out 1 oiiii 122/12 dhu	it with this form.					

Official Form 122A-1

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:50 of 53

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy\_form

s.html#procedure.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case:17-40839-EJC Doc#:1 Filed:06/06/17 Entered:06/06/17 09:19:47 Page:51 of 53 B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Southern District of Georgia

In re		in District or Georg	Case No		
111 1	Nonaid W McEmaney	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSA	ATION OF ATTO	RNEY FOR D	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	f the petition in bankrupto	y, or agreed to be pa	d to me, for services rend	ered or to
	For legal services, I have agreed to accept		<b></b> \$	940.00	
	Prior to the filing of this statement I have received		<b>\$</b>	940.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compensation	ation with any other perso	n unless they are me	mbers and associates of m	ıy law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of				firm. A
5.	In return for the above-disclosed fee, I have agreed to render	r legal service for all aspe	cts of the bankruptcy	case, including:	
	<ul><li>a. Analysis of the debtor's financial situation, and rendering</li><li>b. Preparation and filing of any petition, schedules, statement</li><li>c. Representation of the debtor at the meeting of creditors a</li></ul>	nt of affairs and plan whi	ch may be required;		ptcy;
	<ul> <li>d. [Other provisions as needed]         Negotiations with secured creditors to redurent reaffirmation agreements and applications a 522(f)(2)(A) for avoidance of liens on house     </li> </ul>	as needed; preparation			
6.	By agreement with the debtor(s), the above-disclosed fee door Representation of the debtors in any discharge other adversary proceeding or motion to incompellate work.	argeability actions, ju-	dicial lien avoidar		
	C	CERTIFICATION			
	I certify that the foregoing is a complete statement of any agreement bankruptcy proceeding.	reement or arrangement f	or payment to me for	representation of the deb	tor(s) in
_	June 6, 2017	/s/ JUDSON C.			_
Ι	Date	JUDSON C. HIL Signature of Attor			
		GASTIN & HILL	•		
		P. O. BOX 8012 SAVANNAH, GA			
			Fax: (912) 236-31	23	
		bankruptcy@ga			_
		Name of law firm			

RONALD W MCELHANEY 526 E. 46TH STREET SAVANNAH GA 31405

INTERNAL REVENUE SERVICE SMALL BUSINESS ADMINISTRAT CENTRALIZED INSOLVENCY OPERATIONIS 20 PEACHTREE ROAD, NW

P.O. BOX 7346 6TH FLOOR, PEACHTREE 25TH C PHILADELPHIA PA 19101-7346 ATLANTA GA 30309

AMERICAN EXPRESS P.O. BOX 981537 EL PASO TX 79998

INTERNAL REVENUE SERVICE SMALL BUSINESS ASSISTANCE C INSOLVENCY STOP 334-D, ROOM 400 P. O. BOX 10750 401 W. PEACHTREE STREET, NW SAVANNAH GA 31412 ATLANTA GA 30308

BANK OF AMERICA P.O. BOX 982238 EL PASO TX 79998-2238

LANIER COLLECTION AGENCY & SERVSCHSTHSIDE FIRE/EMS

P.O. BOX 15519 MERCY AMBULANCE SERVICE SAVANNAH GA 31416 1399 DEAN FOREST ROAD SAVANNAH GA 31405

BANK OF AMERICA P. O. BOX 45144 JACKSONVILLE FL 32231

MEMORIAL HEALTH UNIVERSITY MED STRJOSEPH'S HOSPITAL P. O. BOX 23089 11705 MERCI DEVE.
SAVANNAH GA 31419

CHASE BANKRUPTCY UNIT P.O. BOX 15298 WILMINGTON DE 19850 MEMORIAL HEALTH UNIVERSITY MED STRJOSEPH'S/CANDLER BOX 830913 DEPT 2439 BIRMINGHAM AL 35283 P.O. BOX 2252 **BIRMINGHAM AL 35246-2439** 

SUITE A SAVANNAH GA 31419

COASTAL EMPIRE PLASTIC SURGERY MEMORIAL PHYSICIAN PRAC GROUP TRANSWORLD SYSTEMS INC 900 MOHAWK STREET P.O. BOX 102763 ATLANTA GA 30368-2763

507 PRUDENTIAL ROAD HORSHAM PA 19044

GEORGIA DEPARTMENT OF REVENUE MINUTECLINIC OF VIRGINIA BANKRUPTCY SECTION P. O. BOX 8444 1800 CENTURY BLVD, NE, SUITE 9100 BELFAST ME 04915 ATLANTA GA 30345

US ATTORNEY P. O. BOX 8970 SAVANNAH GA 31412

GEORGIA EMERGENCY PHYSICIAN SPECULASISTISTIAGNOSTICS P.O. BOX 740777 P. O. BOX 3291 INDIANAPOLIS IN 46206 CINCINNATI OH 45274

WELLS FARGO P.O. BOX 14517 DES MOINES IA 50306

HOME DEPOT P.O. BOX 6497 SIOUX FALLS SD 57117

SAVANNAH NEUROLOGY SPECIALISTS WELLS FARGO P. O. BOX 14359 P. O. BOX 94435 SAVANNAH GA 31416 **ALBUQUERQUE NM 87199**  WELLS FARGO HOME MORTGAGE P.O. BOX 10335 DES MOINES IA 50306

WELLS FARGO HOME MORTGAGE MAC X7801-03K 3476 STATEVIEW BLVD. FORT MILL SC 29715